

# SPECIAL INVESTIGATIONS OVERVIEW



**Presented by:**

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# FY 23 BWC STATISTICS

Total offices statewide: 11

BWC Personnel: 1603

Total open claims: 529,926

Total Lost time claims: 171,857

Active employers: 258,263

Total medical paid: \$379,481,783

Total compensation paid: \$896,346,895

**Total benefits paid: \$1,275,828,678**



# WHY FOCUS ON FRAUD?

Industry studies estimate that fraud represents 5 to 20% of all workers' compensation benefits. If this is correct at BWC, it would equate to \$65 to \$265 million of BWC's medical and compensation payments.

# SID HISTORICAL STATISTICS

- Established July 1993
- 116 statewide staff
- 135,626 – allegations
- 5,850 – criminal referrals
- 3,297 – criminal convictions
- \$2.24 billion saved



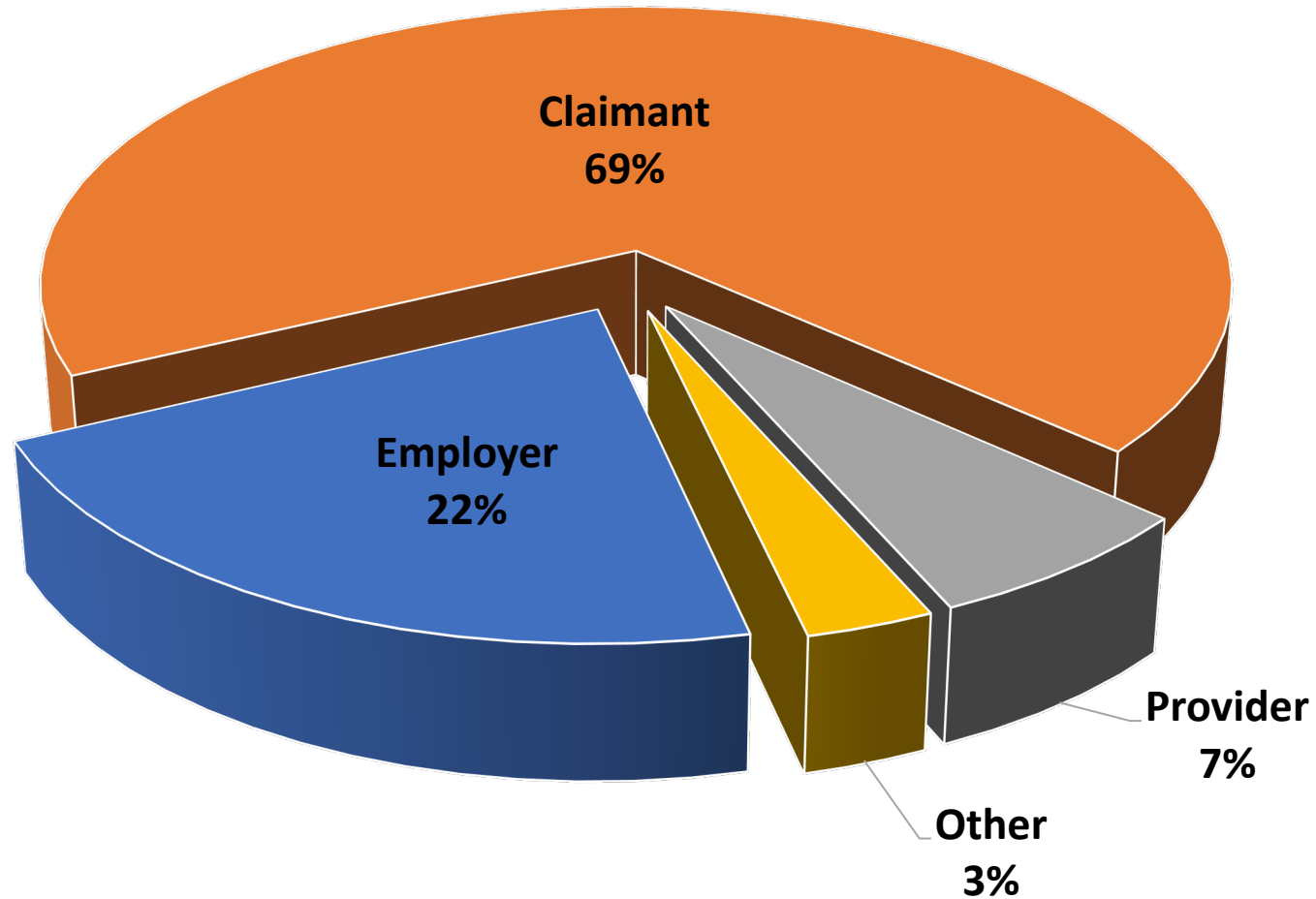
# FY 23 SID STATISTICS

- 2,374 allegations
- 1,362 cases closed
- 118 criminal referrals
- 79 convictions
- \$73.5 million in savings
- \$5.62 return on expenditures

# SID STRUCTURE



# SID CLOSED CASES TYPE



# OHIO REVISED CODE

## Ohio Revised Code (ORC) 2913.48 Workers' Compensation Fraud

No person, with purpose to defraud or knowing that the person is facilitating a fraud, shall:

1. Receive workers' compensation benefits to which the person is not entitled;
2. Make or present a false or misleading statement with the purpose to secure payment;
3. Alter, falsify, destroy, conceal, or remove any record or document necessary to validate a claim.
4. Misrepresent manual codes, classification of employees, payroll, etc.
5. Alter or forge a BWC certificate or fail to maintain BWC coverage.



# CLAIMANT FRAUD

## Types of cases

- Working while receiving benefits
- Physical activity
- False Claims



# HEALTH CARE FRAUD

## Statewide Team

- Agents
- Analysts
- Nurse



## Subject Types

- Medical Doctors
- Chiropractors
- Pharmacies
- DME Companies



# HEALTH CARE FRAUD

## Case Types

- **Phantom Billing**  
Billing for treatment not provided
- **Upcoding**  
Billing higher level of service than provided
- **Unbundling**  
Billing separately instead of bundling get around bundled reimbursement
- **Double Billing**  
Billing two insurance companies same service



# EMPLOYER FRAUD



- Statewide team
- Special agents
- Fraud analysts
- Auditors
- Criminal Investigator



# EMPLOYER FRAUD

## Types of cases

- **False/Altered Certificates**  
Employer falsifies an old certificate to appear current
- **Failure to maintain coverage**  
Employer continues to operate after policy has lapsed
- **Misclassification of employees**  
Employer uses a lower cost classification for all employees
- **Underreporting payroll**  
Employer fails to report all payroll to reduce premium
- **Insufficient funds**  
Employer pays for their policy when no funds are available (bad check)



# CONTACT US

## 1-800-OHIO-BWC

Follow Fraud Reporting Options

[www.bwc.ohio.gov](http://www.bwc.ohio.gov)

[www.facebook.com/ohiobwcfraud](https://www.facebook.com/ohiobwcfraud) 

[www.twitter.com/ohiobwc](https://www.twitter.com/ohiobwc) 

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